

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SR		6-5-01
O.I.P.E. CLASSIFIER		20	6/16
FORMALITY REVIEW	HZ	5C-16	08-07-01
RESPONSE FORMALITY REVIEW	TAP	1110	11-03-01

INDEX OF CLAIMS

< ..... Rejected  
 = ..... Allowed  
 (Through numeral)..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
1	Final Original 12-10-01
2	Final Original 4/19/02
3	Final Original 11/13/02
4	Final Original 6/9/03
5	Final Original 11/24/03
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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